

Approved for use through 7/31/2009. OMB 0651-0032
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to a collection of information unless it displays a valid OMB control number.

Substitute for Form PTO-875

10/677155

(Column 1)

(Column 2)

SMALL ENTITY	
RATE (\$)	FEE (\$)
X	
X	
TOTAL	

OR

OTHER THAN
SMALL ENTITY

RATE (\$)	FEE (\$)
X	
X	
TOTAL	

MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))

* If the difference in column 1 is less than zero, enter "0" in column 2.

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
x 25 ⁰⁰ =	
x 100 ⁰⁰ =	
TOTAL ADD'L FEE	

OR

OTHER THAN
SMALL ENTITY

SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
x 50 ⁰⁰ =	
x 200 ⁰⁰ =	
TOTAL ADD'L FEE	

07-31-06

RATE (\$)	ADDITIONAL FEE (\$)
X =	
X =	
TOTAL ADD'L FEE	

RATE (\$)

ADDL

RATE (\$)		ADDITIONAL FEE (\$)
X	=	
X	=	
TOTAL ADD'L FEE		

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

*** If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total cost) is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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